

Best Available Copy

Lemont Hunter
PCT International Division
(703) 305-3333

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.
10/070170
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1							51					
2							52					
3							53					
4							54					
5							55					
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44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.							TOTAL IND.					
TOTAL DEP.							TOTAL DEP.					
TOTAL CLAIMS							TOTAL CLAIMS					

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